

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

RECEIVED

PLAINTIFF	United States of America	U.S. MARSHAL CONCORD, NH	COURT CASE NUMBER 14-CV-294-PB
DEFENDANT	\$695.00 in U.S. Currency, seized from Phat Stuff, Keene, NH, et al		TYPE OF PROCESS Final Order of Forfeiture
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN see below		
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)		

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		Number of process to be served with this Form 285 <i>7/16 APP 1 DISPOSED CHP</i>
<input type="checkbox"/> Robert J. Rabuck, AUSA US Attorney's Office 55 Pleasant Street Concord, NH 03301		Number of parties to be served in this case <i>1</i>
		Check for service on U.S.A. <i>w D</i>

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Please dispose of the following defendant-in-rem, according to the Final Order of Forfeiture:

CATS ID #14-DEA-598635 TD Bank Checking Account, #9244068759 *\$(906.78)*

Signature of Attorney other Originator requesting service on behalf of: Robert J. Rabuck, AUSA <i>Rab + J. Rabuck</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER (603) 225-1552	DATE 4/8/16
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. <i>(Sign only for USM 285 if more than one USM 285 is submitted)</i>	Total Process <i>1</i>	District of Origin No. <i>49</i>	District to Serve No. <i>49</i>	Signature of Authorized USMS Deputy or Clerk <i>Kate Renaud</i>	Date <i>4/18/16</i>
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I hereby certify and return that have personally served , have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
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Address (complete only different than shown above)	Date <i>4/12/16</i>	Time <input type="checkbox"/> am <input type="checkbox"/> pm
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Signature of U.S. Marshal or Deputy
Kate Renaud

Service Fee <i>\$65</i>	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges <i>\$65.00</i>	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) <i>\$65.00</i>
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REMARKS:

\$ 906.78 transferred to the AFF

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED